



## Complete Summary

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### TITLE

Chronic wound care: percentage of patients aged 18 years and older with a diagnosis of venous ulcer who were prescribed compression therapy within the 12 month reporting period.

### SOURCE(S)

American Society for Plastic Surgeons (ASPS), Physician Consortium for Performance Improvement®, National Committee for Quality Assurance (NCQA). Chronic wound care physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Aug. 35 p. [19 references]

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of venous ulcer who were prescribed compression therapy within the 12 month reporting period.

### RATIONALE

Compression therapy is fundamental to promote healing and prevent recurrence of ulcers in patients with venous abnormality. Although it has proven efficacy, research has shown that it is not universally used in the treatment of patients with venous ulcers. One study found that one third of patients did not receive compression of any sort and there was great variability in the level and type of compression therapy used. Graduated high compression (greater than 30 mmHg)

produces the best results. However, some compression is better than no compression.

The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

For patients with venous hypertension or risk for venous insufficiency, consider graduated compression stockings. (American Society of Plastic Surgeons [ASPS], 2007)

The use of a Class 3 (most supportive) high-compression system (three layer, four layer, short stretch, paste-containing bandages, e.g., Unna's boot, Duke boot) is indicated in the treatment of venous ulcers. Although these modalities are similar in effectiveness, they can differ significantly in comfort and cost. The degree of compression must be modified when mixed venous/arterial disease is confirmed during the diagnostic work-up. Intermittent pneumatic pressure (IPC) can be used with or without compression dressings and can provide another option in patients who cannot or will not use a compression adequate dressing system. (Wound Healing Society [WHS], 2006)

Compression therapy heals more venous leg ulcers than no compression therapy as well as decreases the healing time. High compression is more effective than low compression, but there are no differences in the effectiveness of the different types of products available for high compression. (Wound, Ostomy, and Continence Nurses Society [WOCN], 2005)

#### Compression options

- Elastic compression bandage heals more than inelastic compression
- Multi-layer (2, 3, or 4 layers) sustained, elastic high-compression bandage
- Elastic high-compression stockings to heal venous ulcers
- Elastic multiple-layer high-compression stockings to heal venous ulcers
- Duke Boot or Unna Boot + elastic compression
- Gradient compression better than uniform compression
- Short stretch bandage
- Unna boot zinc paste impregnated bandage
- Intermittent pneumatic compression
- Non-elastic compression with Circaid [or similar device]
- Sequential-gradient pneumatic compression (Association for the Advancement of Wound Care [AAWC], 2005)

## **PRIMARY CLINICAL COMPONENT**

Chronic wound care; venous ulcer; compression therapy

## **DENOMINATOR DESCRIPTION**

All patients aged 18 years and older with a diagnosis of venous ulcer (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

## **NUMERATOR DESCRIPTION**

Patients who were prescribed compression therapy within the 12 month reporting period

**Note:** Refer to the original measure documentation for administrative codes.

## Evidence Supporting the Measure

### EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

### NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Chronic wounds of the lower extremity.](#)

## Evidence Supporting Need for the Measure

### NEED FOR THE MEASURE

Variation in quality for the performance measured

### EVIDENCE SUPPORTING NEED FOR THE MEASURE

Bolton L, Corbett L, Bernato L, Dotson P, Laraus S, Merkle D, Patterson G, Phillips T, McNees P, Riedesel PP, Sheehan P, Government and Regulatory Task Force, Association for the Advancement of Wound Care. Development of a content-validated venous ulcer guideline. *Ostomy Wound Manage* 2006 Nov;52(11):32-48. [PubMed](#)

## State of Use of the Measure

### STATE OF USE

Current routine use

### CURRENT USE

Internal quality improvement  
National reporting

## Application of Measure in its Current Use

### CARE SETTING

Physician Group Practices/Clinics

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

**TARGET POPULATION AGE**

Age greater than or equal to 18 years

**TARGET POPULATION GENDER**

Either male or female

**STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

**Characteristics of the Primary Clinical Component**

**INCIDENCE/PREVALENCE**

See the "Rationale" field.

**ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

**BURDEN OF ILLNESS**

Unspecified

**UTILIZATION**

Unspecified

**COSTS**

Unspecified

**Institute of Medicine National Healthcare Quality Report Categories**

**IOM CARE NEED**

Getting Better  
Living with Illness

**IOM DOMAIN**

Effectiveness

## Data Collection for the Measure

### CASE FINDING

Users of care only

### DESCRIPTION OF CASE FINDING

All patients aged 18 years and older with a diagnosis of venous ulcer

### DENOMINATOR SAMPLING FRAME

Patients associated with provider

### DENOMINATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

All patients aged 18 years and older with a diagnosis of venous ulcer

**Note:** Refer to the original measure documentation for administrative codes.

#### Exclusions

- Documentation of medical reason(s) for not prescribing compression therapy (e.g., severe arterial occlusive disease)
- Documentation of patient reason(s) for not prescribing compression therapy
- Documentation of system reason(s) for not prescribing compression therapy

### RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

### DENOMINATOR (INDEX) EVENT

Clinical Condition  
Encounter

### DENOMINATOR TIME WINDOW

Time window is a single point in time

### NUMERATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Patients who were prescribed compression therapy within the 12 month reporting period

**Note:** Refer to the original measure documentation for administrative codes.

**Exclusions**

None

**MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

**NUMERATOR TIME WINDOW**

Fixed time period

**DATA SOURCE**

Administrative data  
Medical record

**LEVEL OF DETERMINATION OF QUALITY**

Individual Case

**PRE-EXISTING INSTRUMENT USED**

Unspecified

**Computation of the Measure****SCORING**

Rate

**INTERPRETATION OF SCORE**

Better quality is associated with a higher score

**ALLOWANCE FOR PATIENT FACTORS**

Unspecified

**STANDARD OF COMPARISON**

Internal time comparison

**Evaluation of Measure Properties****EXTENT OF MEASURE TESTING**

Unspecified

## Identifying Information

### ORIGINAL TITLE

Measure #4: use of compression system in patients with venous ulcers.

### MEASURE COLLECTION

[The Physician Consortium for Performance Improvement® Measurement Sets](#)

### MEASURE SET NAME

[Chronic Wound Care Physician Performance Measurement Set](#)

### SUBMITTER

American Medical Association on behalf of the American Society of Plastic Surgeons, Physician Consortium for Performance Improvement®, and National Committee for Quality Assurance

### DEVELOPER

American Society of Plastic Surgeons  
National Committee for Quality Assurance  
Physician Consortium for Performance Improvement®

### FUNDING SOURCE(S)

Unspecified

### COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

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## **FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

## **INCLUDED IN**

Ambulatory Care Quality Alliance  
Physician Quality Reporting Initiative

## **ADAPTATION**

Measure was not adapted from another source.

## **RELEASE DATE**

2008 Aug

## **MEASURE STATUS**

This is the current release of the measure.

## **SOURCE(S)**

American Society for Plastic Surgeons (ASPS), Physician Consortium for Performance Improvement®, National Committee for Quality Assurance (NCQA). Chronic wound care physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Aug. 35 p. [19 references]

## **MEASURE AVAILABILITY**

The individual measure, "Measure #4: Use of Compression System in Patients with Venous Ulcers," is published in "Chronic Wound Care Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: [www.physicianconsortium.org](http://www.physicianconsortium.org).

For further information, please contact AMA staff by e-mail at [cqi@ama-assn.org](mailto:cqi@ama-assn.org).

## **NQMC STATUS**

This NQMC summary was completed by ECRI Institute on April 7, 2009. The information was verified by the measure developer on June 4, 2009.

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